

PART B - FEE(S) TRANSMITTAL

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22879 7590 11/15/2006

HEWLETT PACKARD COMPANY
 P O BOX 272400, 3404 E. HARMONY ROAD
 INTELLECTUAL PROPERTY ADMINISTRATION
 FORT COLLINS, CO 80527-2400

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(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/762,303	01/23/2004	Gonzalo Gaston	200209835-1	4629

TITLE OF INVENTION: REMOVING INK WASTE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	02/15/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
GOLDBERG, BRIAN J	2861	347-022000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).	2. For printing on the patent front page, list <input type="checkbox"/> (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, <input type="checkbox"/> (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	<input type="checkbox"/> Foley & Lardner LLP <input type="checkbox"/> 01/03/2007 10000117 002025 10762303 <input type="checkbox"/> 3 1400.00 DA <input type="checkbox"/> 300.00 DA
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

HEWLETT-PACKARD DEVELOPMENT COMPANY, L.P.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

HOUSTON, TEXAS

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

- Issue Fee
- Publication Fee (No small entity discount permitted)
- Advance Order - # of Copies _____

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- A check is enclosed.
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- The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 08-2025 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature WILLIAM T. ELLIS

Date Dec 29, 2006

Typed or printed name WILLIAM T. ELLIS

Registration No. 26,874

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